## **Massachusetts Nongroup Health Insurance**

Guaranteed Issue Plan Rates for the Period Between December 1, 2004 and November 30, 2005

			Sample Monthly Rates					
Company	Plan	Plan Name	Single 25 Yr Old		Family 35 Yr Old w/Sp+2 Children		Two Adults 63 Yr Old w/60 Yr Old Spouse	
			Boston	Springfield	Boston	Springfield	Boston	Springfield
Blue Cross and Blue Shield	Pref Prov Plan	\$250 Deductible	\$503.29	\$443.27	\$1,189.29	\$1,047.44	\$1,798.34	\$1,583.86
including HMO Blue		\$5000 Deductible	\$243.54	\$214.50	\$575.49	\$506.85	\$870.21	\$766.42
Consumer Sales	HMO Plan	Standard	\$406.09	\$357.66	\$959.59	\$845.15	\$1,451.02	\$1,277.96
401 Park Drive, 01-06		Value	\$295.41	\$260.18	\$698.07	\$614.82	\$1,055.57	\$929.68
Boston, MA 02215-3326								
1-800-422-3545								

Website: www.bluecrossma.com

Enhanced Benefits (if any): Fitness and Weight Loss Benefit Programs, Mail order drug program.

Premium by Geographic Area?

Yes.

Payment Mode Discount?

No, only monthly rates are available.

Only available through associations?

No.

2004-2005 Enrollment: May contain up to a 6-month waiting period depending on prior creditable coverage.

Connecticare of	HMO Plan	HMO Plan	n.a.	\$420.62	n.a.	\$1,389.22	n.a.	\$1,553.96	
Massachusetts, Inc.									
175 Scott Swamp Road									
Farmington, CT 06032									
1-800-923-2822 x2873	**** NOTE: TWO ADULT RATE IS FOR TWO SEPARATE SINGLE COVERAGES; FAMILY RATE MAY BE MORE								
Enhanced Benefits (if any):	None.								
Premium by Geographic Area?	Yes. Plan available in only Franklin, Hampden and Hampshire counties.								
Payment Mode Discount?	No, only monthly rates are available.								
Only available through associations?	No.								
2004-2005 Enrollment:	May contain up to a 6-month waiting period depending on prior creditable coverage.								